

Provider Type 34

Provider Documentation Requirements

Transportation/Ambulance

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
015 Full Service Transportation		FAO		No	X			Approval from Financial Services
	416 MR Waiver Services							Approval by BDS
029 Ambulance		FAO		Agency	X			
	228 Land Ambulance							
	229 Air Ambulance							
215 Wheelchair Van		FAO		No	X			Approval from Financial Services